ORCHARD MANOR - FDD

8800	HIGHWAY	61	
T 7 3 T C -	A CHILD		F 2 0 1

LANCASTER	53813	Phone: (608) 723-21	.13	Ownership:	County
Operated from	1/1 To 12/31	Days of Operation	n: 365	Highest Level License:	FDDs
Operate in Cong	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/02):	50	Title 18 (Medicare) Certified?	No
Total Licensed	Bed Capacity	(12/31/02):	50	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on 12/31	./02:	49	Average Daily Census:	47

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/02)					
Home Health Care Supp. Home Care-Personal Care	No No	   Primary Diagnosis 		Age Groups 	ે જ	Less Than 1 Year   1 - 4 Years	12.2 22.4	
Supp. Home Care-Household Services	No	   Developmental Disabilities		Under 65	71.4		65.3	
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74 18.4				
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	8.2		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	2.0	* * * * * * * * * * * * * * * * * * *	******	
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals No		Cancer	0.0			Nursing Staff per 100 Resi		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	0.0	65 & Over	28.6			
Transportation	No	Cerebrovascular	0.0			RNs	4.1	
Referral Service	No	Diabetes	0.0	Sex	용	LPNs	7.6	
Other Services	No	Respiratory	0.0			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	49.0	Aides, & Orderlies	45.5	
Mentally Ill	No			Female	51.0			
Provide Day Programming for			100.0					
Developmentally Disabled	Yes				100.0			

## Method of Reimbursement

		edicare			edicaid itle 19			Other		P	rivate Pay	:		amily Care			anaged Care			
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				49	100.0	157	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	49	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		49	100.0		0	0.0		0	0.0		0	0.0		0	0.0		49	100.0

ORCHARD MANOR - FDD

********	*****	******	*****	*****	*****	*******	******				
Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02									
Deaths During Reporting Period											
					% Needing		Total				
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of				
Private Home/No Home Health	18.2	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents				
Private Home/With Home Health	9.1	Bathing	2.0		89.8	8.2	49				
Other Nursing Homes	9.1	Dressing	28.6		61.2	10.2	49				
Acute Care Hospitals	45.5	Transferring	55.1		32.7	12.2	49				
Psych. HospMR/DD Facilities	0.0	Toilet Use	28.6		61.2	10.2	49				
Rehabilitation Hospitals	0.0	Eating	69.4		16.3	14.3	49				
Other Locations	18.2	******	******		*****	******	*****				
Total Number of Admissions	11	Continence		8	Special Treatme	ents	%				
Percent Discharges To:		Indwelling Or Extern	al Catheter	6.1	Receiving Res	spiratory Care	0.0				
Private Home/No Home Health	37.5	Occ/Freq. Incontinen	t of Bladder	53.1	Receiving Tra	acheostomy Care	0.0				
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	t of Bowel	34.7	Receiving Suc	ctioning	0.0				
Other Nursing Homes	0.0				Receiving Ost	comy Care	4.1				
Acute Care Hospitals	0.0	Mobility			Receiving Tuk	oe Feeding	10.2				
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	18.4	Receiving Med	chanically Altered Diet	s 77.6				
Rehabilitation Hospitals	0.0										
Other Locations	37.5	Skin Care			Other Resident	Characteristics					
Deaths	25.0	With Pressure Sores		0.0	Have Advance	Directives	2.0				
Total Number of Discharges		With Rashes		0.0	Medications						
(Including Deaths)	8				Receiving Psy	choactive Drugs	34.7				

	This		DD		All ilties	
	Facility %	# a C	ilities Ratio	# ac.	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	94.0	83.9	1.12	85.1	1.10	
Current Residents from In-County	44.9	38.2	1.18	76.6	0.59	
Admissions from In-County, Still Residing	18.2	18.5	0.98	20.3	0.90	
Admissions/Average Daily Census	23.4	20.3	1.15	133.4	0.18	
Discharges/Average Daily Census	17.0	23.6	0.72	135.3	0.13	
Discharges To Private Residence/Average Daily Census	6.4	9.8	0.65	56.6	0.11	
Residents Receiving Skilled Care	0.0	0.0	0.00	86.3	0.00	
Residents Aged 65 and Older	28.6	15.3	1.87	87.7	0.33	
Title 19 (Medicaid) Funded Residents	100.0	99.2	1.01	67.5	1.48	
Private Pay Funded Residents	0.0	0.6	0.00	21.0	0.00	
Developmentally Disabled Residents	100.0	99.5	1.00	7.1	14.08	
Mentally Ill Residents	0.0	0.4	0.00	33.3	0.00	
General Medical Service Residents	0.0	0.1	0.00	20.5	0.00	
<pre>Impaired ADL (Mean) *</pre>	37.1	54.0	0.69	49.3	0.75	
Psychological Problems	34.7	48.2	0.72	54.0	0.64	
Nursing Care Required (Mean) *	11.5	11.3	1.01	7.2	1.60	